

**Application Data Sheet**

**Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD Disks::  
Number of Copies of CDs::  
Sequence Submission?::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: DEVICE FOR PLACING INSTRUMENTS  
OR IMPLANTS IN BODY ORGANS  
Attorney Docket Number:: MAGERL2  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 5  
Small Entity?:: Yes  
Latin Name::  
Variety Denomination Name::  
Petition Included:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Switzerland  
Status:: Full Capacity  
Given Name:: Friedrich

Middle Name::  
Family Name:: MAGERL  
Name Suffix::  
City of Residence:: St. Gallen  
State or Province of Residence::  
Country of Residence:: Switzerland  
Street of Mailing Address:: Tutilostrasse 17 h  
City of Mailing Address:: St. Gallen  
State or Province of Mailing Address::  
Country of Mailing Address:: Switzerland  
Postal or Zip Code of Mailing Address:: 9011  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Switzerland  
Status:: Full Capacity  
Given Name:: Christian  
Middle Name::  
Family Name:: WIDMER  
Name Suffix::  
City of Residence:: St. Margrethen  
State or Province of Residence::  
Country of Residence:: Switzerland  
Street of Mailing Address:: Wittestrasse 24  
City of Mailing Address:: St. Margrethen  
State or Province of Mailing Address::  
Country of Mailing Address:: Switzerland  
Postal or Zip Code of Mailing Address:: 9430  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Czech Republic  
Status:: Full Capacity  
Given Name:: Stanislav  
Middle Name::  
Family Name:: TALLER  
Name Suffix::

City of Residence:: Liberec  
State or Province of Residence::  
Country of Residence:: Czech Republic  
Street of Mailing Address:: Lesni Street 13  
City of Mailing Address:: Liberec  
State or Province of Mailing Address::  
Country of Mailing Address:: Czech Republic  
Postal or Zip Code of Mailing Address:: 46001  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Czech Republic  
Status:: Full Capacity  
Given Name:: Richard  
Middle Name::  
Family Name:: Lukas  
Name Suffix::  
City of Residence:: Liberec  
State or Province of Residence::  
Country of Residence:: Czech Republic  
Street of Mailing Address:: Vlci Vrch 671  
City of Mailing Address:: Liberec  
State or Province of Mailing Address::  
Country of Mailing Address:: Czech Republic  
Postal or Zip Code of Mailing Address:: 46015  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Czech Republic  
Status:: Full Capacity  
Given Name:: Petr  
Middle Name::  
Family Name:: SUCHOMEL  
Name Suffix::  
City of Residence:: Liberec  
State or Province of Residence::  
Country of Residence:: Czech Republic

Street of Mailing Address:: Guttenberova Street 7  
City of Mailing Address:: Liberec  
State or Province of Mailing Address::  
Country of Mailing Address:: Czech Republic  
Postal or Zip Code of Mailing Address:: 46001

**Correspondence Information**

Correspondence Customer Number:: 001444

**Representative Information**

Representative Customer Number:: 001444

**Domestic Priority Information**

| Application::    | Continuity Type:: | Parent          | Parent Filing |
|------------------|-------------------|-----------------|---------------|
| This Application | National Stage of | Application::   | Date::        |
|                  |                   | PCT/CH04/000596 | 09-22-04      |

**Foreign Priority Information**

|             |                      |               |                    |
|-------------|----------------------|---------------|--------------------|
| Country::   | Application Number:: | Filing Date:: | Priority Claimed:: |
| Switzerland | 01651/03             | 09-29-03      | Yes                |

**Assignment Information**

Assignee Name:: SEPITEC FOUNDATION  
Street of Mailing Address:: Kirchstrasse 12  
City of Mailing Address:: Vaduz  
State or Province of Mailing Address::  
Country of Mailing Address:: Liechtenstein  
Postal or Zip Code of Mailing Address:: 9490